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CONFIRMATION NO. 4867

<b>SERIAL NUMBER</b> 10/828,479	<b>FILING OR 371(c) DATE</b> 04/21/2004 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1624	<b>ATTORNEY DOCKET NO.</b> 251052US	
<b>APPLICANTS</b> Michael R. Johnson, Chapel Hill, NC;					
<b>** CONTINUING DATA *****</b> This application is a DIV of 10/076,571 02/19/2002 PAT 6,858,615					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 06/29/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> <i>[Initials]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NC	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 122	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 22850					
<b>TITLE</b> Methods of using sodium channel blockers					
<b>FILING FEE RECEIVED</b> 2606	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		